

Annual Thrift Satisfaction Survey

Region (required):

Name of thrift:

Contact Email:

Point of contact for survey responses:

Thrift Docket No.:

Contact Phone:

1. Reflecting on your most recent examination(s), please tell us if:

- a) The examiners took time at the start of the examination to gain an understanding of your institution's business strategy and operating philosophy.

☐ Agree

☐ Disagree

Please explain: _____

- b) The examiners maintained adequate communications with management during the examination.

☐ Agree

☐ Disagree

Please explain: _____

- c) The tone and content of the Report of Examination was consistent with the board or management exit meetings.

☐ Agree

☐ Disagree

Please explain: _____

- d) You felt the examination was of value to your organization.

☐ Agree

☐ Disagree

Please explain: _____

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2. If you had a reason to use or interact with OTS departments or offices other than during examinations, were you satisfied with the accuracy, timeliness, and manner in which your business was handled?

☐ Agree

☐ Disagree

Please explain:

3. Please tell us the things you feel OTS does well.

4. Please tell us the things you feel OTS needs to start doing or do better.

5. Please tell us the things you wish OTS would stop doing.

6. Other Comments.
